



Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

# TRANSMITTAL FORM

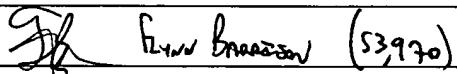
(to be used for all correspondence after initial filing)

		Application Number	10/807,078-Conf. #4065
		Filing Date	March 22, 2004
		First Named Inventor	Kiyoshi Nishio
		Art Unit	2821
		Examiner Name	J. T. Vu
Total Number of Pages in This Submission		Attorney Docket Number	
		09450/100K665-US5	

## ENCLOSURES (Check all that apply)

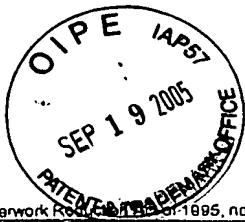
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	Statement under 37 CFR 3.73(b) (1pp); Revocation of Power of Attorney (1pp); Return receipt postcard
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Reply to Missing Parts/ Incomplete Application	Remarks	
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	Applicant respectfully requests that the Power of Attorney is assigned to Customer Number 07278. Please provide us with a corrected filing receipt.	

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	DARBY & DARBY P.C.		
Signature	 (53970)		
Printed name	Joseph R. Robinson		
Date	September 19, 2005	Reg. No.	33,448

Express Mail Label No.

Dated: \_\_\_\_\_



PTO/SB/06 (09-04)

Approved for use through 07/31/2006, OMB 0651-0031  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**STATEMENT UNDER 37 CFR 3.73(b)**Applicant/Patent Owner: Toshiba Lighting & Technology Corp.Application No./Patent No.: 10/807,078 Filed/Issue Date: March 22, 2004Entitled: COMPACT FLUORESCENT LAMP, SELF-BALLASTED FLUORESCENT LAMP AND LUMINAIREToshiba Lighting & Technology Corp. a (Name of Assignee) (Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

1.  the assignee of the entire right, title, and interest; or
2.  an assignee of less than the entire right, title and interest.

The extent (by percentage) of its ownership interest is        %  
in the patent application/patent identified above by virtue of either:

A.  An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel 9925 , Frame 0709 , or for which a copy thereof is attached.

**OR**

B.  A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:

1. From: \_\_\_\_\_ To: \_\_\_\_\_

The document was recorded in the United States Patent and Trademark Office at  
Reel \_\_\_\_\_, Frame \_\_\_\_\_, or for which a copy thereof is attached.

2. From: \_\_\_\_\_ To: \_\_\_\_\_

The document was recorded in the United States Patent and Trademark Office at  
Reel \_\_\_\_\_, Frame \_\_\_\_\_, or for which a copy thereof is attached.

3. From: \_\_\_\_\_ To: \_\_\_\_\_

The document was recorded in the United States Patent and Trademark Office at  
Reel \_\_\_\_\_, Frame \_\_\_\_\_, or for which a copy thereof is attached.

Additional documents in the chain of title are listed on a supplemental sheet.

Copies of assignments or other documents in the chain of title are attached.

(NOTE: A separate copy (i.e., a true copy of the original assignment document(s)) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.08)

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

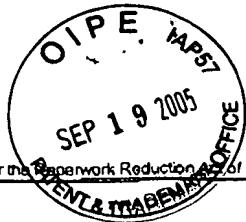
  
Signature

September 1, 2005  
Date

Satoshi ONO, President  
Printed or Typed Name

03-5463-8860  
Telephone Number

Authorized Signer for Assignee  
Title



PTO/SB/62 (04-05)

Approved for use through 11/30/2005. OMB 0651-0035  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<b>REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS</b>	Application Number	10/807,078-Conf. #4065
	Filing Date	March 22, 2004
	First Named Inventor	Kiyoshi Nishio
	Art Unit	2821
	Examiner Name	J. T. Vu
	Attorney Docket Number	09450/100K665-US5

I hereby revoke all previous powers of attorney given in the above-identified application.						
<input type="checkbox"/> A Power of Attorney is submitted herewith. OR <input checked="" type="checkbox"/> I hereby appoint the practitioners associated with the Customer Number: <b>07278</b>						
<input type="checkbox"/> Please change the correspondence address for the above-identified application to: <input type="checkbox"/> The address associated with Customer Number: <b> </b>						
OR <input type="checkbox"/> Firm or Individual Name <b>DARBY &amp; DARBY P.C. Joseph R. Robinson</b>						
Address	P.O. Box 5257					
City	New York					
Country	US	State	NY	Zip	10150-5257	
Telephone	(212) 527-7700	Email				
I am the:						
<input type="checkbox"/> Applicant/Inventor.						
<input checked="" type="checkbox"/> Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)						
SIGNATURE of Applicant or Assignee of Record						
Signature						
Name	Satoshi ONO, President					
Date	September 1, 2005	Telephone	03-5963-8800			
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.						
<input type="checkbox"/>	*Total of <u>1</u> forms are submitted.					

09-21-05

EBW



Application No. (if known): 10/807,078

Attorney Docket No.: 09450/100K665-US5

## Certificate of Express Mailing Under 37 CFR 1.10

I hereby certify that this correspondence is being deposited with the United States Postal Service as Express Mail, Airbill No. EV692129740-US in an envelope addressed to:

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

on September 19, 2005  
Date

Signature

Typed or printed name of person signing Certificate

Registration Number, if applicable

Telephone Number

Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

Transmittal (1 page)  
Statement Under 37 CFR 3.73(b) (1pp)  
Revocation of Power of Attorney...(1pp)  
Return receipt postcard